# California Public Safety Realignment Act (AB 109)

January 24, 2017

















# Population Snapshot as of September 30 2016

Action	Popul	Grand	
	PRCS	Mandatory Supervision	Total
Total Cases Accepted	36,148	3,092	39,240
Total Cases Closed	26,351	1,395	27,746
Cases Serving Custody Portion		464	464
Cases with Outstanding Warrant	2,266	151	2,417
Cases Deported	1,466	0	1,466
Active Cases	6,065	1,082	7,147



## **Coordination of Treatment Services**

- Mental health treatment services
- Substance use disorder (SUD) treatment services
- Health care services
- Temporary housing
- Employment assistance
- Cognitive Based Intervention (CBI)- in development





## **Provision of Mental Health Services**

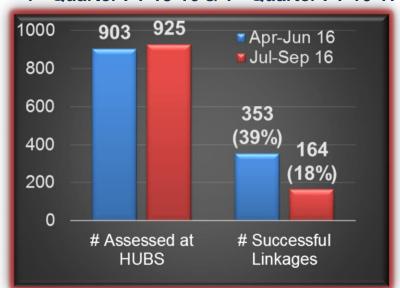
# Orientation and Assessment at HUBs

Department of Mental Health (DMH) Services

- State Hospital Care
- Acute Inpatient Hospital
- Institutions for Mental Disease (IMD)
- Enriched Residential Services (ERS)
- Intensive Outpatient (Full Service Partnerships and similar Programs)
- Less Intensive Outpatient
- Medication Support

# DMH HUB Assessments and Treatment Linkages

Individuals Assessed By DMH 4<sup>th</sup> Quarter FY 15-16 & 1<sup>st</sup> Quarter FY 16-17



- Effective 7/1/2016, a successful linkage is defined as 3+ contacts.
- Data on successful linkage (Jul.- Sept.) is limited due to data entry lag.



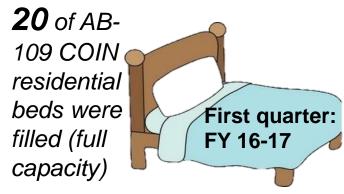
## **Coordination of Services**

### AB109 Co-Occurring Residential Treatment

The Co-Occurring Integration Network **(COIN)** residential beds program is a collaborative effort involving multiple agencies: Department of Public Health – Substance Abuse Prevention and Control (DPH-SAPC), DMH, the Court, Probation, Public Defender, and the Antelope Valley Rehabilitation Center (AVRC).

**COIN** provides integrated residential treatment services for supervised persons who have:

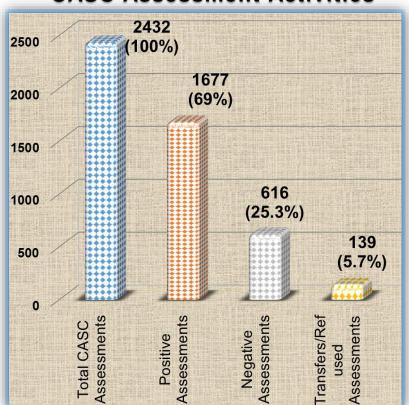
- Co-occurring chronic substance use disorder(s),
- A severe and persistent mental illness,
- A high risk for relapse.

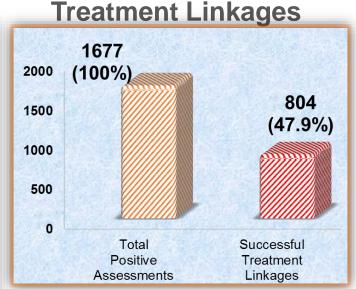


# Provision of Substance Use Disorder (SUD) Treatment / Services

SUD Assessment/Treatment Services (April - September 30, 2016)

**CASC** Assessment Activities





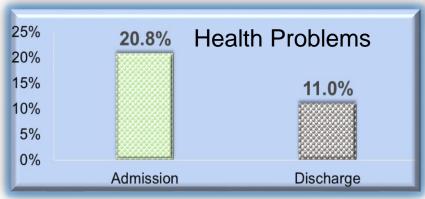
Successful Treatment Linkages: 47.9% that had a Positive assessment were admitted to SUD treatment programs and received one or more treatment services

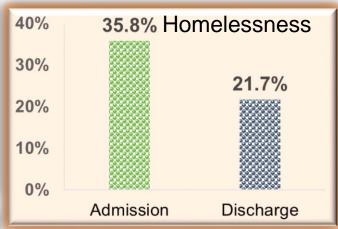


# Provision of Substance Use Disorder (SUD) Treatment / Services

Substance Use Disorder Treatment Outcomes (N=472) Apr. – Sep. 2016







**47.6%** reduction in primary drug use, **39.3%** reduction in homelessness, and **46.9%** reduction in health problems from admission to discharge.



## **Coordination of Health Services**

### **Care Coordination**

Department of Health Services (DHS) registered nurse and clinical social worker provide consultation and care coordination for medical concerns.

### In the first quarter of FY 2016-2017:

423

Pre-release packets reviewed

225

CDCR medical record uploads reviewed

91

Supervised persons received care management services

### **Medically Fragile Residential Placements**

- Leverages DHS Flexible Housing Subsidy Pool
- FY 2016-2017 1<sup>st</sup> Quarter Placements:
  - 3 Board and Care
  - 3 Recuperative Care
  - 1 Group/transitional home





# **Employment Services**

 Employment case management

Job Developers

 Job retention services

- Incentives to improve the effectiveness of the employment program
- Requirement for workshop pre and post test

April 2016 – September 2016

38%

Eligible supervised persons enrolled in job readiness completed and received a certificate.

54%

Eligible supervised persons that enrolled in readiness obtained employment.

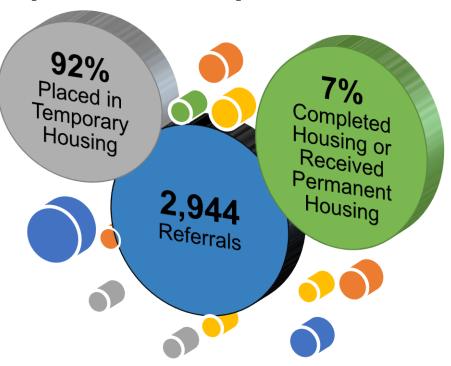




# **Housing Services**

### **April 2016 – September 2016**

- Enhanced temporary housing to homeless supervised persons.
- Increased maximum time limits for housing services to one year.
- Addition of Skilled Nursing and Board and Care housing.





# Implementation of Cognitive Based Intervention (CBI)

### Elicit behavior change

- Supervised person must understand the personal and environmental factors underlying the offending behavior.
- Be taught the skills to make positive changes in the future.
- Necessary for reduction in recidivism to be possible.



Probation aims to implement CBI services by June 2017.



## **Enforcement Coordination Efforts**

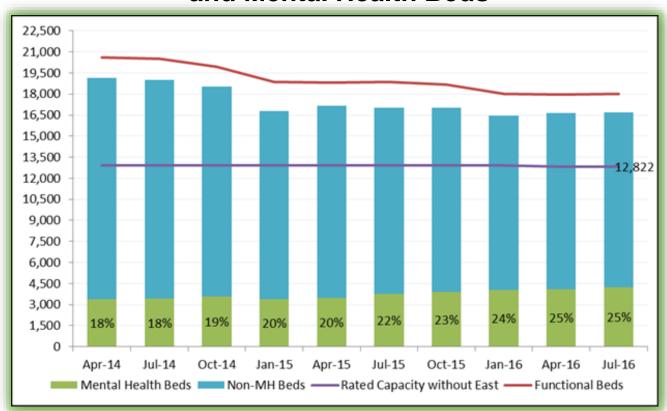
# Parole Compliance Team Stats Fiscal Year Comparison

* Through 1 <sup>st</sup> Quarter	FY 2011/ 2012	FY 2012/ 2013	FY 2013/ 2014	FY 2014/ 2015	FY 2015/ 2016	FY 2016/ 2017*	Total
PSP Arrests	135	537	263	52	33	3	1023
PSP PAL Arrests	22	115	317	396	446	92	1388
Other Arrests	727	510	313	150	135	27	1862
PAL Arrests	42	30	37	35	18	2	164
Extraditions	0	0	5	1	23	0	29
Firearms Seized	115	141	130	62	16	6	470
Compliance Checks Conducted	769	1338	839	229	179	26	3380
No Show Locations	345	33	13	69	37	7	504
Address Verifications	968	920	705	1341	1475	314	5723
FIRS	3356	5012	3635	2050	1316	50	15419



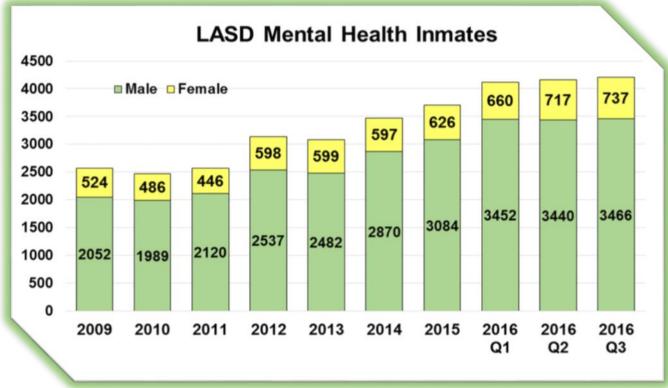
# **AB 109 Custody- Related Matters**

Jail Capacity, Population, Functional Beds, and Mental Health Beds





# **AB 109 Custody- Related Matters**

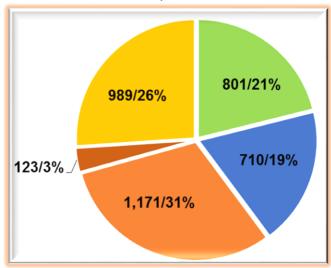


- Average # of inmates receiving mental health treatment during this reporting period was 3,453.
- 14% of those were inmates sentenced under AB109.



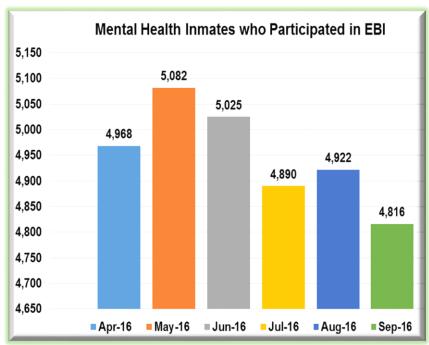
# **Population Management Strategies**

AB-109 Sentenced 3,793



- Earned EBI- Milestones
- CDCR Fire Camp
- Participated in EBI
- Not Participating
- Conservation

The chart represents the entire population receiving mental health treatment, not solely those sentenced under AB109.





## Coordination of In-Custody/ Re-Entry Services

### **Integrated Jail Health Services**

- Phase I of Correctional Health clinical integration completed September 1, 2016
  - Transfer of all LASD medical providers to DHS
  - Transfer of all DMH clinicians to DHS
  - Approximately 580 staff total
- Phase II planning underway for transfer of nursing, pharmacy, remaining clinical and clinical support staff
- Integrated care meetings/committees to address Quality Management, Clinical Case Reviews, Morbidity and Mortality, Emergency Response and Death Review

# Inmate Medical Services at LAC+USC Medical Center (DHS)

- First quarter FY 2016-2017 services for AB109 sentenced inmates:
  - 314 specialty care visits and
     109 Emergency Dept. visits
  - 40 inpatient admissions with average length of stay 3.45 days
- Enhancements to eConsult have resulted in more appropriate referrals for specialty services.

### **Jail Linkage Program**

 In first quarter FY 2016-2017, received 158 AB109 referrals and provided assessments and mental health referrals to 101 AB109 sentenced inmates



# Use of AB 109 Funding to Serve Non-Realignment Population (April – Sept. 2016)



**Proposition 47** 



Participants Served \$7,739

## **Proposition 47** 27 Received +1 MH Services\* X85 clients terminated due to Prop. Received +3 MH 47 Services\*

1

**\$10,471** 

**28** supervised persons terminated due to Prop. 47

**2** post supervised persons remained in SUD treatment

\*Mental health services received post termination



# **Summary**